LOBBYING EXPENDITURE REPORT Ø COVERING JANUARY 1 THROUGH JUNE 30 DUE AUGUST 15 COVERING JULY 1 THROUGH DECEMBER 31 **DUE FEBRUARY 15** FOR OFFICE USE ONLY Postmark Date 813/98 Instructions · Print in ink or type. Filt in Registration Number in spaces provided. · Complete form, have it notarized and return to the Board of Ethics, 8401 United Plaza Blvd., Suite 200, Baton Rouge, LA 70809 (504) 922-1400. This form must be delivered or postmarked by the due date. This form may be faxed to (504) 922-1414. The original should be forwarded

on the day of fax transmittal,

i,								
lame_	Bradford		James		E.		151 F2	
	Lau		First	Nicks	,	MI		
. Busi	ness Address	Mill Street			Hodge,	LA	71247	
		Street and No.	2 20	7/3	City	2.50	State	Zi
Mail	ing Address	Same as abo	ve			lone		
. Busi	ness Phone	318 - 259-5	358					
	A50-100	Area Code and	Telephone Number		-5			
 Total of all expenditures made January 1 through (Include expenditures from Schedules A and B) 			/ 1 through Jun	c 30:	\$	2,0	46.98	- 5
. Total of all expenditures made July 1 (When Applicable) (facture expenditures			hrough Decem from Schedules A s	ber 31: nd B)	\$		-0-	1992
	l of all expenditu 4 added with Lina 5 s		de during calendar year: 221 Line 6)			2,0	46.98	
. Did y	you make an exp	enditure exceedir	ig \$50 on one c	ccasion:	for any	one J	egislator:	
	n January 1 through	igh June 307 December 31?	☐ Yes	E E	No No		□ NA	

LOBBYING EXPENDITURE REPORT



8.	Did you make expenditures exceeding the sum of \$250 for any one legislator:								
	From July 1 through December 31?		Yes Yes	X	No No		NA		
	If the answer to either question in Nur	nber	8 above	is YBS, pl	ease corr	iplete Sc	chedule A and attach.		
9,	Did you expend funds for a reception, social gathering, or other function to which the entire legislature, either house, any standing committee, select committee, statutory committee, committee created by resolution of either house, subcommittee of any committee, recognized caucus, or any delegation thereof were invited during the reporting period?								
	☐ Yes			×	No				
	If the answer to Number 9 above is YES, please complete Schedule B and attach.								
	State of Jackson		2% 2%						
	Before me, the undersigned authority, James E. Bradford						leclare and		
	acknowledge to me that the above state					ie, dia b	ectare and		
	Ş	•	ture of L	2.B	nody	low			
	Sworn to and subscribed before me on	this	310	day of _(lug	ust	19 <u>98</u> .		
	5	Ø	Sara	R.W.	Lil	ley_	- 7		
	· ·	TOTAL	Hodg	H. Lolley, No e, Jockson Pr emmission is F	riph, Louisia	arna j			

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